

ATTACHMENT A

ADA Complaint and Reasonable Modification Request Form

MCPT is committed to providing safe, reliable, courteous, accessible and user-friendly service to its customers. To ensure equality and fairness, MCPT is committed to making reasonable modification to its policies, practices and procedures to avoid discrimination and ensure programs and services are accessible to individuals with disabilities. Complaints regarding ADA Policy can be made by using this form or contacting us by phone.

Preferred Contact Method (select one):  Email  Phone  US Mail

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Briefly describe your ADA complaint or your reasonable modification complaint in order to use the bus service:

---

---

---

---

---

---

---

---

Please send this from via US Mail, or by using the contact information below. You may attach any written material or other information that you think is relevant to your complaint to this form.

MCPT Chief Operation Officer  
805 North Broad St  
Carlinville IL 62626  
Phone: 217-854-3223